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FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1		e instructions)	/IN		Office use only
1. NAME OF COMMITTEE (in	full) (Check is change		ample: If typying, type or the lines	12FE4M5	
MAERSK INC	, GOOD GOVERNMENT, I	FŲNP , , , ,			1
ADDRESS (number and	1530 Wilson	n Blvd.			
_	\$uite,650				
(Check if addi is changed)	Arlington			L VA	22209
		CITY	_	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MA	ALL ADDRESS  Maerskgov.com				
gpentimontia					
COMMITTEE'S WEB	PAGE ADDRESS (URL)				
				11111	
COMMITTEE'S FAX I 703-351-0135	NUMBER				
2. DATE M. 1.2	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	6 Y			
3. FEC IDENTIFICA	ATION NUMBER	C CO	0217471		
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)					
I certify that I have exam	ined this Statement and to the be	st of my knowledge a	nd belief it is true, correct ar	nd complete	
Type or Print Name of	Treasurer Mr Gen	e Pentimonti			
Signature of Treasure	r Electronically Filed by <b>N</b>	Ir Gene Pentim	onti	Date 12	/ DDD / YYYYY Y 2006
NOTE: Submission of fa	alse, erroneous, or incomplete info		the person signing this State	•	s of 2 U.S.C. S437g.
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2003)

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5.	TYPE OF COMMITTEE (Check One)					
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)					
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name of Candidate						
	Party Affiliation Sought: House Senate President	State				
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate					
		nocratic, ublican,etc.) Party.				
6. 	Name of Any Connected Organization or Affiliated Committee  Maersk Inc.	1				
	Mailing Address  Giralda Farms					
	Madison Avenue					
	Madison NJ NJ 079	40				
	CITY▲ STATE ▲ ZI	P CODE A				
	Relationship Connected organization					
	Type of Connected Organization:					
	X Corporation Corporation w/o Capital Stock Labor Organization	1				
	Membership Organization Trade Association Cooperative					

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Write or Type Committee Name			
MAERSK INC. GOOD	GOVERNMENT FUND		
<ol> <li>Custodian of Records:   possession of Committee</li> </ol>	e person in		
Full Name			
Mailing Address			
Title or Position ♥	CITY A	STATE▲	ZIP CODE A
		Telephone number	
Full Name	ny designated agent (e.g., assistant treasure	7).	
	ene Pentimonti		
Mr C	ene Pentimonti 1530 Wilson Blvd		
of Treasurer Mr G			
of Treasurer Mr G	1530 Wilson Blvd		22209
of Treasurer Mr G	1530 Wilson Blvd Suite 650	VASTATE▲	22209 ZIP CODE ▲
of Treasurer  Mailing Address  Title or Position ♥	1530 Wilson Blvd  Suite 650  Arlington  CITY A		
of Treasurer  Mailing Address  Title or Position ♥	1530 Wilson Blvd  Suite 650  Arlington  CITY A	STATE▲	ZIP CODE A
of Treasurer  Mailing Address  Title or Position ▼  Senior V  Full Name of Designated	1530 Wilson Blvd  Suite 650  Arlington  CITY A	STATE▲	ZIP CODE A
of Treasurer  Mailing Address  Title or Position ▼  Senior V  Full Name of Designated Agent	1530 Wilson Blvd  Suite 650  Arlington  CITY A	STATE▲	ZIP CODE A

Telephone number

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9.	Banks or Other Depositorie safety deposit boxes or mainta	ains funds.	olds accounts, rents
	Name of Bank, Depository, et	C.	
	Bank	of America	
	Mailing Address	1801 K Street NW	
		Washington DC	20006   _
		CITY △ STATE △	ZIP CODE △